

APPLICATION DATA SHEET**Application Information**

Application number::	09/784,793
Filing Date::	02/15/2001
Application Type::	Regular
Subject Matter::	Utility
Title::	CONSOLIDIATED BILLING SYSTEM AND METHOD FOR USE IN TELEPHONY NETWORKS
Attorney Docket Number::	1182a
Request for Non-Publication?::	Yes
Suggested Drawing Figure::	FIG. 2
Total Drawing Sheets::	20

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	USA
Given Name::	NOEL
Middle Name::	RAY
Family Name::	MARCHBANKS
City of Residence::	PLANO
State or Providence of Residence::	TX
Country of Residence::	USA
Street of mailing address::	3501 SAILMAKER LANE
City of mailing address::	PLANO
State or Province of mailing address::	TX
Country of mailing address::	USA
Postal or Zip Code of mailing address::	74023

Applicant Authority Type:: Inventor

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Primary Citizenship

Country:: USA
Given Name:: WEBSTER
Middle Name:: S.
Family Name:: COFFMAN
City of Residence:: FLOWER MOUND
State or Providence of Residence:: TX
Country of Residence:: USA
Street of mailing address:: 1605 FLATWOOD DRIVE
City of mailing address:: FLOWER MOUND
State or Province of mailing address:: TX
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 75028

Applicant Authority Type::

Inventor

Primary Citizenship

Country:: USA
Given Name:: KENNETH
Middle Name:: M.
Family Name:: SAGER
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State or Providence of Residence:: TX
Country of Residence:: USA
Street of mailing address:: 421 WATERSIDE DRIVE
City of mailing address:: IRVING
State or Province of mailing address:: TX
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 75063

Applicant Authority Type::

Inventor

Primary Citizenship

Country::	USA
Given Name::	LEANN
Middle Name::	R.
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State or Providence of Residence::	TX
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City of mailing address::	IRVING
State or Province of mailing address::	TX
Country of mailing address::	USA
Postal or Zip Code of mailing address::	75061
Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	USA
Given Name::	LUIS
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Country of Residence::	USA
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City of mailing address::	ARLINGTON
State or Province of mailing address::	TX
Country of mailing address::	USA
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Applicant Authority Type::	Inventor
Primary Citizenship	

Country:: USA
Given Name:: JONATHAN
Middle Name:: D.
Family Name:: MACHA
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State or Providence of Residence:: TX
Country of Residence:: USA
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City of mailing address:: FRISCO
State or Province of mailing address:: TX
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 75035

Correspondence Information**Correspondence Customer**

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Representative Information

Representative Customer Number::	28004
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
THIS APPLICATION	Continuation of	09/154,962	09/17/1998

FEB-24-2004 TUE 10:49 AM DUFT SETTER OLLILA BURNS

FAX NO. 3039389995

P. 12

Assignee Information

Assignee name::

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